



Iridescence Cares Pet Adoption Application

Applicant Information

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Driver's License/ID #: _____

Household Information

Number of Adults in Household: _____

Number of Children (and ages): _____

Do you rent or own your home? Rent Own

If renting, landlord's name & phone: _____

Type of Home: House Apartment Condo Other _____

Do you have a fenced yard? Yes No

Pet Preferences

Type of Pet Desired: Dog Cat Other: _____

Age Preference: Puppy/Kitten Adult Senior

Gender Preference: Male Female No Preference

Why do you want to adopt a pet? _____

Current & Previous Pets

List any pets currently in your household (species, age, spayed/neutered, vaccinated):

List any pets previously owned (species, what happened):

Veterinary Information

Current Veterinarian Name: _____

Clinic Name: _____

Phone Number: _____

References

Reference 1 Name, Relationship, & Phone #: _____

Reference 2 Name, Relationship, & Phone #: _____

Care & Responsibility

Who will be the primary caregiver for the pet? _____

How many hours per day will the pet be left alone? _____

Where will the pet stay during the day? _____

Where will the pet stay at night? _____

If you move, what will you do with the pet? _____

Adoption Agreement

By signing below, I affirm that the information provided in this application is true and complete. I understand that Iridescence Cares reserves the right to deny any adoption application. If approved, I agree to provide proper care, shelter, food, water, and medical attention for the adopted pet. I further agree not to sell, abandon, or surrender the pet to a shelter without notifying Iridescence Cares.

Applicant Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____